	PATENT A	RD		091	18:	38,02	X					
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMAL TYPE	SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			81				RAT	Έ	FEE	1	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			Thominus 20=		124		X\$ 9) <u>=</u>		OR	X\$18=	2160
INDEPENDENT CLAIMS			\3 minus 3 =		10		X40	.		OR	X80=	800
MULTIPLE DEPENDENT CLAIM PRESENT						+135	;=		OR	+270=	270	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA			OR	TOTAL	3940	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	LL E	NTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total	. 8	Minus	•• /	24		X \$ 9	=	•	OR	X\$18=	
AME	Independent	* 2	Minus	***	/ ()	= _	X40			OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135	*		OR	+270=	
							TO ADDIT, F	TAL			TOTAL ADDIT. FEE	
,		(Column 1)		(Colur		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	=]		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	***	CI AIM		X40=	=	<u>.</u>	OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+270=	
							ADDIT. F			OR	TOTAL ADDIT. FEE	
	Walter Form	(Column 1) CLAIMS		(Colur		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ļ.	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL _FEE
	Total		Minus	**		=	X\$ 9	=		OR	X\$18=	ï
AME	Independent	NTATION OF M	Minus	***		-	X40=	.		OR	X80=	•
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										TOTAL		
***	If the "Highest Nu	mber Previously P	aid For IN THI	S SPACE I	is less the	n 3, enter "3."	ADDIT. F	EE L			ADDIT. FEE	
	ine mignest Nun	nber Previously Pai	ra tor (lorello)	ındebend	ent) 18 t/16	i udinast Unube		app	ropnate DO)	in col	wiin I.	

Application or Docket Number